# Exhibit 2

Home

Step 1. Filing institution Contact information Step 2. Transaction Location(s) Information Step 3. Person(s) Involved Information Step 4. Amount and Type of Transaction(s)

Version Number: 13



## **Currency Transaction Report**

OMB No. 1506-0004, OMB No. 1506-0005, OMB No. 1506-0064

### Steps to Submit

- 1. Complete the report in its entirety with all requested or required data known to the filer.
- 2. Click "Validate" to ensure proper formatting and that all required fields are completed.
- 3. Sign with PIN.
- 4. Click "Save"; filers may also "Print" a paper copy for their records.
- 5. Click "Submit".

Filing Name			
*1 Type of filing	☐ Initial report	Correct/amend prior report	FinCEN directed Backfiling
Prior report BSA	dentifier		
Save	Validate	Submit	Print

By providing my PIN, I acknowledge that I am electronically signing the BSA report submitted.

Sign with PIN

This PDF is intended for testing purpose only. Please do not use it in a production environment.

Release Date: 04/29/2020

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## Case 5:25-cv-00344-FBt Document 31-4 Filed 05/01/25 Page 3 of 6 Step 1. Filing Institution Contact Step 2. Transaction Location(s) Step 3. Person(s) involved Information Information Step 4. Amount and Type of Transaction(s) Home Part IV Filing Institution Contact Information \*52 Type of financial institution Other (specify) \*43 Primary federal regulator 53 If 52a - Casino/Card Club is checked, indicate type (check only one) State licensed casino Tribal authorized casino Card club Other \*44 Legal name of filing institution 45 Alternate name, e.g. trade name, DBA \*46 EIN \*47 Address \*48 City \*49 State \*50 ZIP Code \*51 Country 54 Filing institution ID type ID number \*55 Contact office \*56 Phone number Ext. \*57 Date filed (Date flied will be auto-populated when the form is signed.)

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Home		Step 1. Filling Institution Contact Information	Step 2. Transaction Location(s) Information	Step 3. Person(s) Involved Information	Step 4. Amount and Type of Transaction(s)
Part III Transactio	n Locati	on 1 of 1		00	
Would you like to ins	ert all applic	cable filing institution in	formation into Part III? Yes		
38 Type of financial in	nstitution			•	
Other (specify)					
29 Primary federal re	gulator			-	
39 If 38a - Casino/Car	d Club is ch	necked, indicate type (o	check only one)		
State license	ed casino	Tribal authorized o	asino Card club 0	ther	
30 Legal name of fina	ncial institu	tion		SI	
31 Alternate name, e.	g. trade nar	me, DBA			
32 EIN Unknown					
33 Address					
*34 City			_		
35 State			•		
36 ZIP Code					
37 Country					
40 Financial institution	ID type			·	
ID number	[		]		
*41 Cash in amount fo	or transactio	on location			
*42 Cash out amount	for transac	tion location			

## Case 5:25-cy-00344-FBr Filed 05/01/25 Page 5 of 6 Document 31-4 Step 2. Transaction Location(s) Information Step 3. Person(s) involved information Step 1. Filling Institution Contact Information Step 4. Amount and Type of Home Transaction(s) Part I Person Involved in Transaction(s) 4 Person conducting Person conducting Person on whose behalf \*2 d Common carrier c $\square$ transaction on own behalf transaction for another transaction was conducted 3 Multiple transactions Check ☐ If entity \*4 Individual's last name ☐ Unknown or entity's legal name \*5 First name Unknown 6 Middle name Suffix 7 Gender 8 Alternate name 9 Occupation or type of business 9a NAICS Code Unknown \*10 Address Unknown \*11 City Unknown \*13 ZIP/Postal Code Unknown \*12 State Unknown \*14 Country 16 TIN type \*15 TIN Unknown ☐ Unknown \*17 Date of birth 18 Contact phone number Ext. 19 E-mail address \*20 Form of identification used to verify identity Unknown ☐ Driver's license/State ID ☐ Passport ☐ Alien Registration ☐ Other Number Country Issuing State 21 Cash in amount for individual or entity listed in Item 4 S Account number 22 Cash out amount for individual or entity listed in Item 4 \$ Account number

## Case 5:25-cy-00344-FB<sub>rt</sub> Document 31-4 Filed 05/01/25 Page 6 of 6

Home

Step 1. Filing institution Contact information Step 2. Transaction Location(s) Step 3. Person(s) Involved Information

Step 4. Amount and Type of Transaction(s)

## Part II Amount and Type of Transaction(s). Check all boxes that apply.

5 CASH IN: (in U.S. dollar equivalent)		*27 CASH OUT: (in U.S. dollar equivalent)			
a Deposit(s)	•	.00	a Withdrawal(s)		.00
b Payment(s)		.00	b Advance(s) on credit	(including markers)	.00
c Currency received for t transfer(s) out	funds	.00	c Currency paid from fu	inds transfer(s) in	.00.
d Purchase of negotiable instrument (s)  e Currency exchange(s)  f Currency to prepaid access  g Purchases of casinos chips, tokens and other gaming instruments  h Currency wager(s) including money plays		.00_	d Negotiable Instrument(s) cashed  e Currency exchange(s)  f Currency from prepaid access  g Redemption(s) of casino chips, tokens, TITO tickets and other gaming instruments  h Payment(s) on wager(s) (including race and OTB or sports pool)		.00
		.00_			
		.00			
		.00			.00
		.00			.00
Bills inserted into gami	na devices	.00	Travel and complimentary expenses and book gaming incentives		.00
Other (specify):	ing devices	.00	J Payment for tournament, contest or other promotions		
		.00	z Other (specify):	*	.00
		.00			.00
Total cash in	\$	.00_	Total cash out	s	.00
Foreign cash in		Forei	gn Country		0 0
Foreign cash out		Forei	gn Country	•	0 0